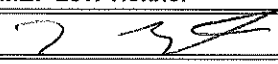


OHA - Drinking Water Services - Surface Water Quality Data Form  
 Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: Wallowa  
 Month/Year: Feb-21

System Name: City of Joseph ID#: 41 00414 WTP: TP -

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day <sup>1</sup> [NTU]
1			0.11				0.11
2			0.14				0.14
3			0.11				0.11
4			0.14				0.14
5			0.13				0.13
6			0.12				0.12
7			0.11				0.11
8			0.14				0.14
9			0.13				0.13
10			0.13				0.13
11			0.15				0.15
12			0.12				0.12
13			0.14				0.14
14			0.16				0.16
15			0.15				0.15
16			0.13				0.13
17			0.13				0.13
18			0.15				0.15
19			0.11				0.11
20			0.11				0.11
21			0.11				0.11
22			0.12				0.12
23			0.15				0.15
24			0.14				0.14
25			0.11				0.11
26			0.13				0.13
27			0.13				0.13
28			0.14				0.14
29							
30							
31							

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup>	Yes	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	Yes	Yes	Yes
Notes: Slow sand filter was down for cleaning and maintainance. Well was used exclusively and residual maintained in system.		PRINTED NAME: Levi Tickner	
		SIGNATURE: 	DATE: 3/8/21
		PHONE #: ( 541 ) 398-1804	CERT #: T-008870

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. <sup>2</sup> Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :  
 Disinfection *Giardia* Log Inactiv: 1.0

System Name: City of Joseph ID#: 41 00414 Month/Year: Feb-21

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T) [minutes]	Actual CT	Temp [° C]	pH	Required CT	CT Met? <sup>3</sup> Yes / No	Peak Hourly Demand Flow [GPM]
	[ppm or mg/L]		C X T			formula		
1	0.61		0.0	8.9	7.43	46.1	NO	0
2	0.62		0.0	9.6	7.36	43.0	NO	0
3	0.65		0.0	9.5	7.57	46.8	NO	0
4	0.6		0.0	8.8	7.72	51.4	NO	0
5	0.56		0.0	7.8	7.83	57.0	NO	0
6	0.59		0.0	7.4	7.68	55.6	NO	0
7	0.58		0.0	7.9	7.76	55.3	NO	0
8	0.56		0.0	8.4	7.97	57.5	NO	0
9	0.57		0.0	9.1	7.94	54.4	NO	0
10	0.58		0.0	8.1	7.96	58.6	NO	0
11	0.54		0.0	8.9	7.95	55.1	NO	0
12	0.55		0.0	9.0	7.96	55.0	NO	0
13	0.54		0.0	8.8	7.94	55.3	NO	0
14	0.55		0.0	8.3	7.91	56.6	NO	0
15	0.53		0.0	8.1	7.97	58.5	NO	0
16	0.54		0.0	8.8	7.87	53.9	NO	0
17	0.51		0.0	9.3	7.94	53.3	NO	0
18	0.5		0.0	8.6	7.97	56.4	NO	0
19	0.51		0.0	7.9	7.96	59.0	NO	0
20	0.53		0.0	7.6	7.93	59.7	NO	0
21	0.5		0.0	8.1	7.99	58.7	NO	0
22	0.5		0.0	9.5	7.86	51.0	NO	0
23	0.49		0.0	9.2	7.98	54.3	NO	0
24	0.49		0.0	8.2	7.99	58.3	NO	0
25	0.48		0.0	8.8	7.94	54.9	NO	0
26	0.48		0.0	9.3	8.05	55.2	NO	0
27	0.49		0.0	9.0	7.98	55.0	NO	0
28	0.49		0.0	9.4	7.91	52.2	NO	0
29								
30								
31								

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised July 2018

Return by 10th of following month by email, fax, or mail to:  
 dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350